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29906 7590 05/24/2007					Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
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							(Depositor's name)	
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			L				(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	A	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/750,176 12/31/2003		Ruwan Jayanetti	Ruwan Jayanetti		040.0002 (A002) 5021			
TITLE OF INVENTION		PARATUS AND METH		1		T		
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	JE PRI	EV. PAID ISSUE I			
nonprovisional	NO	\$1400	\$300	_	\$0	\$1700	08/24/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS					
SHERMAN, STEPHEN G 2629  1. Change of correspondence address or indication of "Fee Address" (37)			345-173000	o natant	t front page list			
I, Change of correspondence CFR 1.363).  Change of correspondence Address form PTO/SI	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a							
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3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or	type)				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSI	(B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Symbol Technologies, Inc. Holtsville, NY								
Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🛱 Corporation or other private group entity 🛄 Government								
4a. The following fee(s) are submitted:  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)								
Issue Fee	☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.							
Publication Fee (N	, ,	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 2001 (enclose an extra copy of this form).						
5 Changa in Entity Sta	tue (from status indicate	d above)	overpayment, to D	eposit A	Account Number	(enclose a	in extra copy of this form).	
5. Change in Entity Status (from status indicated above)  \[ \begin{align*} \text{ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.} \] \[ \begin{align*} \text{ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).} \]								
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